

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000039641

Entity Name: SUPERIOR TILE & MARBLE, INC.

FILED
Sep 13, 2005
Secretary of State

Current Principal Place of Business:

2022 WHISPERING SAND CT
DOVER, FL 33527 US

New Principal Place of Business:

2836 BLOUNT RD
DOVER, FL 33527 US

Current Mailing Address:

P.O. BOX 42
VALRICO, FL 33595 US

New Mailing Address:

FEI Number: 65-0577706

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCLOUD, DAVID
2022 WHISPERING SAND COURT
DOVER, FL 33527 US

Name and Address of New Registered Agent:

MCLOUD, DAVID
2836 BLOUNT RD
DOVER, FL 33527 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

09/13/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MCLOUD, DAVID
Address: 2022 WHISPERING SAND COURT
City-St-Zip: DOVER, FL 33527 P

Title: VP () Delete
Name: MCLOUD, BEVERLY
Address: 2022 WHISPERING SAND COURT
City-St-Zip: DOVER, FL 33527

Title: T (X) Delete
Name: FENDLE, PATRICK
Address: 1710 FOLLOW THRU TRAIL
City-St-Zip: TAMPA, FL 33612

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MCLOUD, DAVID
Address: 2836 BLOUNT RD
City-St-Zip: DOVER, FL 33527 P

Title: VP (X) Change () Addition
Name: MCLOUD, BEVERLY
Address: 2836 BLOUNT RD
City-St-Zip: DOVER, FL 33527

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID MCLOUD

P

09/13/2005

Electronic Signature of Signing Officer or Director

Date